

## Request for Hearing by Mail at the Transit Adjudication Bureau

This form allows you to dispute a Transit Adjudication Bureau (TAB) Notice of Violation summons without having to appear in person. You must send this form and all evidence you wish to be considered so that it is received at TAB on or before the hearing date on your Notice of Violation summons.

A Hearing Officer will review your statement and all evidence that you submit. TAB will mail you the Hearing Officer's decision. TAB will not send decisions via email. If you have not received a response within three weeks of sending this request, please contact TAB at (347) 643-5805 Monday to Friday 8:00 AM to 4:45 PM.

**Send by mail with all evidence to: Transit Adjudication Bureau PO Box 29133 Brooklyn, NY 11202-9133**

**OR**

**Send by email with all evidence attached to: [TABHearingbymail@nyct.com](mailto:TABHearingbymail@nyct.com)**

\* Indicates required fields.

| Respondent Information                                      |                                |                       |                                 |
|-------------------------------------------------------------|--------------------------------|-----------------------|---------------------------------|
| Full Name*:                                                 | <small>Last*</small>           | <small>First*</small> | <small>M.I.</small>             |
|                                                             |                                |                       | <small>Date*</small>            |
| Mailing Address*:<br>(your decision will<br>be mailed here) | <small>Street Address*</small> |                       | <small>Apartment/Unit #</small> |
|                                                             |                                |                       |                                 |
|                                                             | <small>City*</small>           | <small>State*</small> | <small>ZIP Code*</small>        |
| Phone:                                                      |                                |                       |                                 |
| Social Security Number:                                     |                                |                       |                                 |
| Date of Birth*:                                             |                                |                       |                                 |
| Email:                                                      |                                |                       |                                 |
| Employer Name:                                              |                                |                       |                                 |
| Employer Address:                                           |                                |                       |                                 |

| Violation Information                                                                                                |  |
|----------------------------------------------------------------------------------------------------------------------|--|
| <i>If you do not know the Notice of Violation #, please call (347) 643-5805 Monday to Friday 8:00 AM to 4:45 PM.</i> |  |
| Notice of Violation #*:                                                                                              |  |
| Date of Offense:                                                                                                     |  |
| Hearing Date:                                                                                                        |  |

| Complete this Section for "Entered without Payment" Violation                                                   |  |
|-----------------------------------------------------------------------------------------------------------------|--|
| <i>If you used a MetroCard, you must attach a photo of the back of the MetroCard showing the serial number.</i> |  |
| MetroCard #:                                                                                                    |  |
| OMNY Transit Account #:                                                                                         |  |

**Note:** If you used OMNY to pay your fare, please include your OMNY Transit Account Number. Only the OMNY Transit Account Number can verify your payment. Bank statements and photos cannot be verified without the OMNY Transit Account Number.

**To obtain the OMNY Transit Account Number by telephone:** Please call OMNY Customer Service at (877) 789-6669 Monday to Friday from 8:00 AM to 5:00 PM. When prompted for a credit card number, press "0" to be transferred to a representative who will ask your card number and expiration date of the card used to travel. The representative will provide you with your Transit Account Number.

**To obtain the OMNY Transit Account Number online:** Visit <https://omny.info/> to create an OMNY account with a valid email address. Add the credit card information and the Transit Account Number will appear in your "Wallet" on the website.

**Complete this Section for Violation on the Select Bus**

Location where you  
boarded the Select Bus:

***Why should the Notice of Violation be dismissed?  
(Your statement should be detailed and fully explain the basis of your defense.)***

I am providing the following statement to contest this Notice of Violation\*:

**Certification**

☐

By checking this box, I understand that I have the right to be represented by an attorney in this matter.\*

☐

By checking this box, I understand that I waived my right to an in person hearing.\*

By entering my name, I affirm under penalty of perjury that to the best of my knowledge all the statements in this form are true and correct.

Signature

(please type)\*: \_\_\_\_\_

Date\*: \_\_\_\_\_

**If submitting by email, please attach all evidence you wish to be considered to this email.  
For “Entered without Payment” violations, please send a photo of the back of the  
MetroCard showing the serial number.**